

The Examination of the Needs and Stress Levels of the Parents of Handicapped Children in Terms of Some Variables

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The investigation was concerned with the examination of the needs and stress levels of the parents of mentally disabled children in terms of some variables. The study included parents (15 mothers and 13 fathers) of 28 mentally disabled children composed of 14 girls and 14 boys who were getting education in the School of Practice and Work Center for the Mentally Disabled in Cankiri. The data were collected by using "The Family Introduction Form", FNS (Family Needs Survey) and QFS-F (Questionnaire on Resources and Stress-F) Turkish. The data were analyzed by Kruskal Wallis H and Mann Whitney U tests. Most of the parents examined were over 41 years old, married as well as primary school graduates. Moreover, 53.6% of them were mothers and 46.4% of them were fathers. According to the FNS, the parents mostly need knowledge. Meanwhile, they had the feeling of pessimism according to QRS-F Turkish. When the average scores from the total scale were examined, the ones who were illiterate and unemployed ($p < 0.05$) had mentally retarded boy in the six to 12 age range ($p > 0.05$). Moreover, according to the measurements, the parents who were high school graduate, unemployed had mentally retarded boy in the six to 12 age range ($p > 0.05$). It was suggested that the necessities of the parents of mentally disabled children should be identified, supported with respect to economical, social and psychological, and they also should be informed about dialing with the stress.

Keywords: handicapped children, family needs, stress level

Introduction

The intelligence is a term describing a property of mind composed of related abilities, such as understanding, abstract thought, reasoning, working harmoniously. The mental obstacle is a complicated situation as a result of the slow progression of the mental abilities due to the various reasons. WHO (World Health Organization) defines the mental retardation as the limitation of a person's expected social roles related to the age, sex, social and cultural factors. However, American Association Mental Retardation describes the mental retardation as a disorder characterized by the slower development in the intelligence than a typical child and deficits in two or more adaptive behaviors such as communication, self-care skills, social abilities, academic skills, self-guidance abilities, management of free time, security and health (Aral & Gürsoy, 2007). Even though the children with different levels of mental disability have all the same stages of development, their developments differ always from that of typical children.

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The involvement of a baby into a family causes many novelties and alterations in the relationships. The expectations of the parents from each other as couples, their near surroundings and their society would change. Even the birth of a normal child induces many changes in a family's life and creates new circumstances hard to be get used to. Nevertheless, the birth of handicapped children may destroy the ordinary life of families and even the marriage life of the couples (Byrne & Cunningham, 1985; Damiani, 1999). The birth of a mentally retarded child may generate a crisis in the life of his/her parents since their expectation would be affected. While the parents are waiting for a normal healthy child and getting prepared for it, it is usually very difficult to get used to the fact that they would have a mentally disabled child and arrange their lives newly according to this fact (Fraley, 1990; Clubb, 1991). Furthermore, although the responses of the parents are mostly similar when they get to know that they would have a handicapped child (Kroth & Edge, 1997), the parents may react differently related to their socio-economic levels, religious believes, levels of knowledge, the feeling of responsible or desperate (Blackhurst & Berdine, 1993). Therefore, the parents are not able to plan the life of their children and their own lives, either due to the fact that they are under a lot of stress and emotional strain. Indeed, those strains may lead the parents to have more severe emotional problems (Clubb, 1991; Fitcher, 1998).

The identification of the parental needs is very important for the determination of mode, content and quality of the service provided for those families. Although every family has different necessities, those needs can be grouped. In "The Preference Inventory for Family Information", Turnbull and Turnbull grouped the needs of the parents as five groups, study of children, collaboration with professionals, planning for the future, finding and using help and support for the purpose of the family relief (Sucuoglu, 1995). However, according to FNS (Family Needs Survey) developed by Bailey and Simeonsson (1988), the necessities of the family are classified as the need of knowledge, the need of support, guidance to explain the status of the children to others, public services, financial needs and social needs related to the functioning of the family. The determination of the needs of the families with disabled children is critical for minimizing the negative impacts of the situation of the family and maximizing the level of the support. Additionally, it provides appropriate services to be offered and healthy development of the children.

The emotional strains, inability of the sufficient information on the situation of the disabled individuals, difficulties in explaining this situation to others, the health and behavior problems of the disabled children and the necessity of the consultation experts about the treatment and education constitute important sources of the stress for the families. In addition those stress factors, the efforts to find appropriate environment for education of the children, requirement of more time, energy and finance also lead families to increase the stress levels. It was detected that those difficulties lived by the parents lead to stress (Byrne & Cunningham, 1985; Damiani, 1999; Gupta, 2007; Coskun & Akkas, 2009).

That is the reason why it is important to determine the levels of stress of the families with disabled children besides to inform them about sources of the support and guide them about how to reach internal and external resources. Furthermore, meeting the needs of the family is important in terms of not only accepting the situation more easily, but also contributing to the education of the children more. The purpose of the research is to examine the needs and stress levels of the parents of mentally disabled children who were getting education in the School of Practice and Work Center for the Mentally Disabled in Cankiri in terms of different variables.

Material and Method

The survey was aimed to be a descriptive research to investigate how the education level and employment

status, in addition to the age and gender of the mentally disabled children, affect the needs and stress levels of the family.

The Population and Sample of the Survey

There are a total of 28 parents (primarily 15 mothers, and 13 fathers) of young children with mental handicaps, who were studying in the School of Practice and Work Center for the Mentally Disabled in Cankiri, for academic year of 2009 to 2010.

Tools for Data Collection

The Family Introduction Form was used to determine the socio-demographic characteristic of the parents, FNS was used to identify the necessities of the families, and finally to identify stress factors caused by being parents of mentally retarded children, QRS-F (Questionnaire on Resources and Stress-F) Turkish was used.

The Family Introduction Form. It is composed of 18 questions about age, marital status, educational status, profession, intermarriage of the parents and age, gender, birth order, level of the handicap of the children besides the problems related to the care of the disabled children.

FNS. It is a total of 35 questions improved by Bailey and Simeonsson (1988) and translated to Turkish by Sucuoğlu (1995). Those are needs for information (seven items), support (eight items), and understanding from others (five items) community services (five items), financial resources (six items) and family functioning (four items). In the scale of the survey, there are three Likert-type marking choices: "I definitely need help with this (3)", "Not sure (2)" and "I definitely do not need help with this (1)" (Marsh, 1992; Krauss, 2000; Brassard & Boehm, 2008). The validity and reliability analysis of the survey was done by Sucuoğlu ($\alpha = 0.90$). The maximum score of the FNS is 105 and the minimum score is 35. The high score got from the FNS suggests the degree of needs of the parents.

QRS-F Turkish. QRS was improved by Holroyd, and shortened (QRS-F) validity and reliability of which was analyzed by Friedrich, Greenberg, and Crnic (Brassard & Boehm, 2008). The shortened form of the survey was translated to Turkish by Kaner, analyzed in terms of validity and reliability in a big sample size ($N = 622$). QRS-F is composed of 39 questions with three scales about incapacitation (16 items), pessimism (15 items) and parent and family problems (eight items). The items are marked with "Yes" or "No". For the total survey, Kuder Richardson-20 (KR-20) (0.92), Cronbach Alpha (0.91) and two halves (0.89) were adequate for the internal consistency coefficient. The maximum score of the survey is 32 and the minimum score is seven. The higher score the parents get from the survey, the higher levels of stress they have.

The Data Collection Methodology

The parents of the mentally disabled children were invited to the school, and the meeting was held after the necessary permissions had been received and the collaboration had been done with the principal of the school. In the meeting, after introduction of all the families, the purpose of the survey was described to them. The parents were informed about how to fill out the forms. The application took 40 to 60 minutes and the parents had very supportive approach towards the application since they care their children.

The Analysis of the Data

The Family Introduction Form was analyzed and results of which were presented to the parents as percentages. The data of the survey collected by FNS and QRS-F Turkish were measured and analyzed by the SPSS (Statistical Package for the Social Sciences). The mean values and percentages of the data were

calculated. Since the data of the research did not show the normal distribution, the nonparametric tests known as Kruskal Wallis H and Mann Whitney U tests were used in the analysis of the data (Buyukozturk, 2008).

Results

The findings of the research about the examination of the needs of parents of mentally retarded children and the description of the affect of the education and employment status of the parents as well as the age and gender of the disabled children at the stress levels of those parents were presented in tables.

In the research, 53.6% of the parents were mothers, 46.4% were fathers, 78.6% were over 41 years old, 53.6% were primary school graduate and unemployed, 96.4% were married, 60.7% had three or four children, 57.1% were not having intermarriage, 71.4% were having normal healthy children (see Table 1).

Table 1

The Distribution of Some Characteristics of the Parents in the Study (N = 28)

Variables belong to parents	N	Percentage (%)
Age		
31-40	6	21.4
41 and over 41	22	78.6
The education level		
Illiterate	1	3.6
Primary school	15	53.6
Intermediate school	6	21.4
High school	5	17.8
University	1	3.6
The employment status		
Employed	8	28.6
Unemployed	15	53.6
Retired	5	17.8
The form of the parent		
Mother	15	53.6
Father	13	46.4
Marital status		
Married	27	96.4
Divorced	1	3.6
Number of the children		
1-2	11	39.3
3-4	17	60.7
The intermarriage status		
None	16	57.1
1. level	8	28.6
2. level	3	10.7
3. level	1	3.6
The disability status of other children		
None	21	71.4
Physically handicapped	1	3.6
Mentally handicapped	7	25

Once the characteristics of the disabled children excluded from the study were examined, 39.3% of them

were between 19 to 22 years old, half were girls, half were boys, 46.4% the disability occurred within three years after the birth, 35.7% had problems during the time of the birth (see Table 2).

Table 2

The Distribution of Some Characteristics of the Disabled Children in the Study (N = 28)

Variables belong to the disabled children	N	Percentage (%)
Age		
6-12	8	28.6
13-18	9	32.1
19-22	11	39.3
Gender		
Girl	14	50
Boy	14	50
Age of the diagnosis		
At the birth	12	42.9
Within three years after birth	13	46.4
Three years after birth	3	10.7
The reason of the disability		
The problems during pregnancy	4	14.3
The problems during the birth	10	35.7
The problems after birth	5	17.9
The mistake of the doctor	1	3.6
Intermarriage	5	17.9
Genetics	3	10.7

Seventy-eight point six percentage of the parents did not blame anyone for the disability of their children, 85.7% of them blamed themselves, 78.6% of them shared the difficulties while they were raising their children with the people around them, and 67.9% of them did not received any support from others (see Table 3).

Table 3

The Distribution of Some Statements of the Parents in the Study (N = 28)

The statements of the parents	N	Percentage (%)
To blame others for having disabled children		
No	22	78.6
Yes	6	21.4
To blame themselves for having disabled children		
No	24	85.7
Yes	4	14.3
To share difficulties during raising the children		
With nobody	6	21.4
Yes	22	78.6
To get family support during raising the children		
Yes	9	32.1
No	19	67.9
To get support from surroundings during raising the children		
Yes	13	46.4
No	15	53.6

The parents got scores as 17.50 ± 4.86 from the needs for information sub-factor, 17.36 ± 4.30 from the support sub-factor, 10.46 ± 4.05 from the understanding from others sub-factor, 10.64 ± 3.55 from the community services sub-factor, 12.61 ± 4.74 from the financial resources sub-factor, and 8.89 ± 3.33 from the family functioning sub-factor. The Cronbach Alpha values related to the sub-factor of FNS were 0.93, 0.70, 0.89, 0.83, 0.91 and 0.90 respectively. It was suggested that the reliability of internal consistency belong to sub-factors and sum of the scales was high (see Table 4).

Table 4

Some Properties of FNS

Sub-factor	Items	Score range	Mean (\bar{X})	Standard deviation (SD)	Cronbach (α)
Needs for information	7	7-21	17.50	4.86	0.93
Support	8	8-27	17.36	4.30	0.70
Understanding from others	5	5-15	10.46	4.05	0.89
Community services	5	5-15	10.64	3.55	0.83
Financial resources	6	6-18	12.61	4.74	0.91
Family functioning	4	4-12	8.89	3.33	0.90
Total	35	35-105	77.46	20.52	0.95

The average scores of the sub-factors of the parents, resulted from QRS-F Turkish, were 5.89 ± 3.28 from functional incapacitation sub-factor, 10.21 ± 2.56 from pessimism sub-factor, 3.46 ± 2.05 from parent and family problems sub-factor. The KR-20 reliability of internal consistency belongs to total (0.83) and sub-factor, such as functional incapacitation (0.74), pessimism (0.65), parent and family problems (0.66) were adequate. The stress factors of the families were pessimism, functional incapacitation and parent and family problems (see Table 5).

Table 5

Some Properties of QRS-F Turkish

Sub-factor	Items	Score range	Mean (\bar{X})	Standard deviation (SD)	Kuder Richardson (KR-20)
Functional incapacitation	16	0-13	5.89	3.28	0.74
Pessimism	15	6-14	10.21	2.56	0.65
Parent and family problems	8	1-8	3.46	2.05	0.66
Total	39	7-32	19.56	6.38	0.83

It was indicated that those who were illiterate (21.00 ± 1.02), unemployed (19.06 ± 3.84), having disabled boys (17.71 ± 5.23), between six and 12 years old (21.00 ± 2.31) need information mostly ($p > 0.05$), however, those who were illiterate (24.00 ± 2.11 , $\chi^2 = 9.777$, $p < 0.05$), unemployed (18.80 ± 3.94), having girls (17.71 ± 3.72), between six and 12 years old (24.00 ± 4.01), need support mostly ($p > 0.05$), and finally those who were illiterate (15.00 ± 2.12), unemployed (12.46 ± 3.35 , $\chi^2 = 9.160$, $p < 0.05$), having disabled daughter (10.57 ± 3.83) in the age range of six and 12 (15.00 ± 2.32) need mostly to explain the situation of their children to others ($p > 0.05$). Although it was not meaningful, the analysis of the data, according to the community services and financial resources needs sub-factor of the survey, showed that those, who were illiterate (15.00 ± 2.11 to 18.00 ± 4.67), unemployed (11.73 ± 3.53 to 14.26 ± 4.06), having disabled boys (11.21 ± 3.92 to 13.42 ± 4.86)

between six and 12 years old (15.00 ± 3.12 to 18.00 ± 2.12), need mostly family necessities. On the other hand, it was suggested that the parents participating in the survey, who were illiterate (12.00 ± 1.01), unemployed (10.40 ± 2.55 , $\chi^2 = 6.967$, $p < 0.05$), having disabled boys (9.42 ± 3.00) between six and 12 years old (12.00 ± 3.13) were more in need than the others ($p > 0.05$) (see Table 6).

Table 6

The Results of the Analysis in Terms of the Variables of the Parents According to FNS

Sub-factor Variables	Needs for information $X \pm SD$	Support $X \pm SD$	Understanding from others $X \pm SD$	Community services $X \pm SD$	Financial resources $X \pm SD$	Family functioning $X \pm SD$
Education level						
Illiterate	21.00 ± 1.02	24.00 ± 2.11	15.00 ± 2.12	15.00 ± 2.11	18.00 ± 4.67	12.00 ± 1.01
Primary school	17.77 ± 4.64	17.18 ± 4.14	10.45 ± 4.11	10.54 ± 3.76	12.81 ± 4.68	9.04 ± 3.34
Intermediate school	15.00 ± 8.48	17.00 ± 1.41	8.00 ± 1.41	8.50 ± 2.12	7.00 ± 1.41	8.50 ± 2.12
High school	19.50 ± 2.12	19.50 ± 6.36	13.50 ± 2.12	12.50 ± 0.70	15.50 ± 3.53	8.00 ± 5.65
University	9.00 ± 1.21	11.00 ± 1.23	5.00 ± 1.11	9.00 ± 1.00	8.00 ± 1.01	5.00 ± 1.01
The statistics of the test	$\chi^2 = 3.089$ $p > 0.05$	$\chi^2 = 9.777$ $p < 0.05$	$\chi^2 = 4.953$ $p > 0.05$	$\chi^2 = 2.293$ $p > 0.05$	$\chi^2 = 3.782$ $p > 0.05$	$\chi^2 = 2.351$ $p > 0.05$
The employment status						
Employed	15.87 ± 5.89	16.50 ± 4.65	9.12 ± 3.48	8.62 ± 2.82	10.87 ± 4.94	7.12 ± 3.68
Unemployed	19.06 ± 3.84	18.80 ± 3.94	12.46 ± 3.35	11.73 ± 3.53	14.26 ± 4.06	10.40 ± 2.55
Retired	15.04 ± 5.17	14.40 ± 3.43	6.60 ± 3.57	1.60 ± 3.84	10.40 ± 5.36	7.20 ± 3.11
The statistics of the test	$\chi^2 = 3.714$ $p > 0.05$	$\chi^2 = 3.964$ $p > 0.05$	$\chi^2 = 9.160$ $p < 0.05$	$\chi^2 = 3.782$ $p > 0.05$	$\chi^2 = 4.778$ $p > 0.05$	$\chi^2 = 6.967$ $p < 0.05$
Age of the children						
6-12	21.00 ± 2.31	24.00 ± 4.01	15.00 ± 2.32	15.00 ± 3.12	18.00 ± 2.12	12.00 ± 3.13
13-18	18.57 ± 2.37	18.00 ± 4.69	12.00 ± 2.82	10.85 ± 3.62	14.14 ± 4.70	9.57 ± 3.25
19-22	16.33 ± 6.55	16.27 ± 3.79	8.63 ± 4.17	10.27 ± 3.82	10.18 ± 3.10	8.18 ± 3.18
The statistics of the test	$\chi^2 = 1.031$ $p > 0.05$	$\chi^2 = 2.963$ $p > 0.05$	$\chi^2 = 4.513$ $p > 0.05$	$\chi^2 = 1.783$ $p > 0.05$	$\chi^2 = 5.951$ $p > 0.05$	$\chi^2 = 1.974$ $p > 0.05$
Gender of the children						
Girl	17.28 ± 4.63	17.71 ± 3.72	10.57 ± 3.83	10.07 ± 3.17	11.78 ± 4.64	8.35 ± 3.65
Boy	17.71 ± 5.23	17.00 ± 4.91	10.35 ± 4.39	11.21 ± 3.92	13.42 ± 4.86	9.42 ± 3.00
The statistics of the test	$U = -0.704$ $p > 0.05$	$U = -0.485$ $p > 0.05$	$U = 0.094$ $p > 0.05$	$U = -1.206$ $p > 0.05$	$U = -1.271$ $p > 0.05$	$U = 0.875$ $p > 0.05$

When the overall scores of survey applied to the parents of mentally retarded children were examined, it was suggested that the ones who were illiterate (105.00 ± 7.07 , $\chi^2 = 6.129$, $p > 0.05$), unemployed (86.73 ± 17.13 , $\chi^2 = 6.129$, $p < 0.05$), having disabled boys (79.14 ± 21.90 , $U = -0.575$, $p > 0.05$) between six and 12 years old (105.00 ± 18.54 , $\chi^2 = 4.734$, $p > 0.05$) were more in need than the others.

According to QRS-F Turkish, the data related to the functional incapacitation sub-factor indicated that the parents who were intermediate school graduate (8.50 ± 6.36), employed (6.62 ± 3.92), having daughters (5.92 ± 3.02) between six and 12 years old (8.00 ± 1.01 , $\chi^2 = 9.413$, $p < 0.05$), had higher levels of stress ($p > 0.05$). Moreover, the parents who were high school graduates (13.50 ± 0.70), unemployed (10.66 ± 2.12), having boys (10.78 ± 2.48) between six and 12 years old (12.00 ± 1.91), had the feeling of more pessimism ($p > 0.05$). However, the parents who were high school graduates (5.50 ± 3.53), employed (3.50 ± 2.39), having boys (3.92 ± 1.89) between six and 12 years old (4.71 ± 2.13), had more parental and family problems ($p > 0.05$) (see Table 7).

Table 7

The Results of the Analysis in Terms of the Variables of the Parents According to QRS-F Turkish

Sub-factor	Functional incapacitation	Pessimism	Parent and family problems
Variables	$X \pm SD$	$X \pm SD$	$X \pm SD$
Education level			
Illiterate	8.00 \pm 1.12	9.00 \pm 1.12	4.00 \pm 1.12
Primary school	5.77 \pm 3.23	10.04 \pm 2.49	3.36 \pm 2.01
Intermediate school	8.50 \pm 6.36	11.50 \pm 0.70	3.50 \pm 0.70
High school	5.00 \pm 1.41	13.50 \pm 0.70	5.50 \pm 3.53
University	3.00 \pm 1.01	6.00 \pm 0.11	1.00 \pm 0.07
The statistics of the test	$\chi^2 = 2.926$ $p > 0.05$	$\chi^2 = 6.928$ $p > 0.05$	$\chi^2 = 3.459$ $p > 0.05$
The employment status			
Employed	6.62 \pm 3.92	9.62 \pm 2.82	3.50 \pm 2.39
Unemployed	6.33 \pm 3.06	10.66 \pm 2.12	3.46 \pm 2.06
Retired	3.40 \pm 1.81	9.80 \pm 3.56	3.40 \pm 1.81
The statistics of the test	$\chi^2 = 4.807$ $p > 0.05$	$\chi^2 = 0.803$ $p > 0.05$	$\chi^2 = 0.055$ $p > 0.05$
Age of the children			
6-12	8.00 \pm 1.01	12.00 \pm 1.91	4.71 \pm 2.13
13-18	7.00 \pm 3.57	9.44 \pm 2.87	3.44 \pm 2.35
19-22	3.81 \pm 1.72	9.81 \pm 2.40	2.63 \pm 1.50
The statistics of the test	$\chi^2 = 9.413$ $p < 0.05$	$\chi^2 = 4.740$ $p > 0.05$	$\chi^2 = 4.343$ $p > 0.05$
Gender of the children			
Girl	5.92 \pm 3.02	9.64 \pm 2.59	3.00 \pm 2.14
Boy	5.85 \pm 3.63	10.78 \pm 2.48	3.92 \pm 1.89
The statistics of the test	$U = -0.278$ $p > 0.05$	$U = -1.180$ $p > 0.05$	$U = -1.585$ $p > 0.05$

While the overall scores of the parents resulted from the survey were analyzed, it was seen that the ones who were high school graduate (24.00 ± 2.82 , $\chi^2 = 4.665$, $p > 0.05$), unemployed (20.46 ± 6.18 , $\chi^2 = 1.449$, $p > 0.05$), having disabled boys (20.87 ± 6.64 , $U = -1.036$, $p > 0.05$) between six and 12 years old (21.00 ± 5.75 , $\chi^2 = 6.700$, $p > 0.05$), had higher levels of stress.

Discussion

The needs of the parents about their necessities of disabled children were described as information, support, community services, financial resources and understanding from others. Among the needs of those parents, priority belongs to the need of more information about the situation of their disabled children. These information consists of the knowledge of how to be better parents and communicate with their children, how to get their children educated (Rosenberg, Robinson, & Beckman, 1984), in addition to which services they could benefit from and how to obtain those services currently and in the future (Ayer, 1984). As the several researches indicated the possible communication problems in the families with disabled children, the need of causing their children to gain various social skills, education and treatment of the children, and how to get this treatment were among information that the parents need mostly (Sucuoğlu, 1995; Hanline, 1989; Kargin, Akcamete, & Baydik, 2001; Ozsenol, Isikhan, Unay, Aydın, Akın, & Gokcay, 2003, Ciftci-Tekinarslan & Bircan, 2009). However, in this research, the information that the parents need most consists of the knowledge about the development and growth of their disabled children, how to control their children's behaviors, how to play and

Speak with them, and how to teach the social and self-care skills to children. Moreover, the parents who were illiterate, unemployed and having boys between six and 12 years old were in need of more information than the other parents were in our research. The education of the parents would provide them to adapt to being parents of disabled children, understand their children's thoughts and feelings as well their own thoughts and feelings, and similarly be able to accept their children as they are. Ciftci-Tekinarslan and Bircan (2009) claimed in their researches that the education level and the employment status of those parents did not affect the needs of the parents significantly. However, the research done by Sola and Diken (2008) suggested that the mothers who were university graduate needed more information about their disabled children. The high education level, employment status, the disability status of the children, how to spend time and communicate with their children, and how to teach some skills all provide the parents to collect data about what to do now and in the future, which saves the parents from the darkness. Additionally, the education level of the parents is highly related to the active participation of the parents in the programs for their children's education and benefiting more from those programs. Although it is not significant, the parents of disabled boys between six and 12 years old need information most of all. It is thought that this situation is highly related to the fact that the parents would adapt to their children's situation and meet their needs of information over time due to the early age of their children.

In our research, the needs about the family functioning were in the second order of the family needs. It was found that the parents need help for the house works, child care, and cooperation of the works between the family members, making decisions about the entertainment and rest activities, learning how to support each other during their difficult times, and making discussions about their problems and finding solutions. The parents who were illiterate, unemployed ($p < 0.05$), having boys in the early ages need these information most of all.

It was stated that the parents needed to meet other parents having disabled children, more friends whom they could talk, more conversation with the religious officials and the doctors-nurses of the children. Moreover, it was observed that the ones who were illiterate, unemployed, having disabled daughters in early ages needed mostly to be supported. The parents may exhibit different behaviors in the face of their children's situations and have difficulties in adaptation to the environment. That is the reason why the presence of a support system in the society they live has great importance since they need consulting services. The support staff provided the necessary supports for the families by identifying what they actually needed in terms of information, skills and resources (Canam, 1993). It is also important that the support services provided to the families should be suitable for the characteristics, priorities and cultures of the parents. The present research indicated that there is a significant difference between the education level of the parents and their needs of support ($p < 0.05$). Furthermore, it is thought that the parents that were employed and had high education level were able to reach the resources more easily. The parents of disabled children needed to be understood, supported and helped during the period of the adaptation to their children's situations. Therefore, it can be said that the disabled children are more dependent on their parents physically, socially and emotionally because their children are in early ages. Furthermore, although the parents need more support, they may not be aware of the support resources since they are in the period of the adaptation to their situation. Supporting the parents of the disabled children socially would reduce their levels of anxiety (Coskun & Akkas, 2009). When those parents come together with other families with similar problems, it will make positive contributions to them (Hastings & Beck, 2004).

It is not enough that the parents of disabled children get knowledge about only the social services. At the

same time, they should be provided to benefit from the existing services. However, they need help to be able to reach those services. The medical services to ensure the safety of the children and their health of teeth, babysitter, recreation and religious services all contribute the social services. (Ayer, 1984; Bailey & Simeonsson, 1988). Similarly, in our research, it was indicated that the parents needed social services like rest homes or kindergartens for disabled children when they should take their children to the doctor, dentist or kindergarten. The parents who were illiterate, unemployed and had boys between six and 12 years old stated that they needed community services for the care of their children. The low education level of the parents increases the importance of the social services and meeting the need of support. Moreover, as Akcamete and Kargin (1996) claimed in their research that the mothers need to read books and articles about the families with disabled children, also they need dentists to help the children, social workers and psychologists or psychiatrists to share their problems.

The financial needs contain not only basic needs, such as nutrition and clothing expenses, transportation expenses due to the state of house or business, but also specific needs such as expenses for the health and education of the children (Bailey & Simeonsson, 1988; Dyson, 1993). The results of the research showed that the parents needed financial support for finding work, payment for the child minder and toys that the children need, nutrition and clothing expenses, rent of the house, medical care of the children, and payment for the special instruments. Although the parents stated that they needed financial support, the results showed that the order of the financial support was after the need of information, the family functioning, the need of support and social services. It was estimated that the need of financial support was in the last order according to this survey, because those children were going to the special school opened by the state, as a result, this school did not require special expenditures for the education of those disabled children. The study made by Akcamete and Kargin (1996) suggested that the order of the need of financial support involving rent of house, clothing, transportation expenses was in the second order. Farmer, Marien, Clark, Sherman, and Selva (2004) claimed that while parents' socio-economic levels decrease their family needs increases. Therefore, meeting the financial needs of the families with disabled children with the help of the state or voluntary organizations is very important.

The birth of the disabled children may lead to some changes in the family life. First of all, the parents do not know what to do with their disabled children, where to go with them, what to tell others and what to ask about this situation, so they get confused due to this new situation. As a result, the parents want to explain the statement to their other children, old members of the family, their close friends, relatives, their neighbors and even strangers (Bailey & Simeonsson, 1988). Furthermore, the data resulted from this research suggested that the parents need more help to be able to explain the situation of their children to their partners, the family of their partners, neighbors, friends, strangers, other children and the sisters or brothers of the disabled children. It was assigned that the parents who were illiterate, unemployed ($p < 0.05$), and had daughters between six and 12 years old needed to explain the situation most of all. The studies prove the fact that the parents are affected negatively in terms of social life since they have disabled children, which consequently lead to the social isolation (Kearney & Griffin, 2001; Seltzer, Greenberg, Floyd, Pettee, & Hong, 2001). If the parents share their feelings and thoughts with the ones whom they constantly interact, they will feel more relieved and become more confident. It is necessary to create opportunities for those children to be known by the community, to be adopted to the society as well as to be with others, moreover, it is important to afford to provide them the lives as independent as possible. The most important step to integrate those children into the community is to put

them among their peers instead of hiding them from the society. It is necessary that the situation of the children explained to near surroundings and should be explained to ones who wonder and ask about the children in order to be known and adopted by the children's environment. In terms of disabled children and their parents, it is not approved that the mothers of the disabled children withdraw themselves, refuse to go to house visits and limit the incomings visitors to the house. The parents are required to explain correctly their children's situation to members of the family and people around them. In order to prevent discrimination and ridicule, the society should be aware of the disability of the children.

As QRS-F Turkish in the research proved that the parents were under stress due to the pessimism, parental and family problems and function failure. Similarly, according to other researches, the parents of disabled children were under more stress than the parents of healthy children (Bebko, Konstantareas, & Springer, 1987; Emerson, Robertson, & Wood, 2004; Hastings, Beck, & Hill, 2005; Sloper & Beresford, 2006). Some stress factors about who will care the child in the future, insufficient interest to other members of the family, how the child will gain his/her life, financial difficulties, and the fact that the child will never be totally healthy lead the parents to have the feeling of anxiety, anger, resentment, disappointment, desperation and dissatisfaction, also these stress factors make them more pessimist. In our study, the parents who were high school graduate, unemployed, with disabled boys between six and 12 were under more stress related to the pessimism than the others. As Karadag (2009) stated that in the study the mothers of disabled children, whose education levels were low, needed more social support, additionally they had the feeling of desperation most of all. Moreover, the studies supported the fact that the parents of disabled children who were in early ages or in puberty were under more stress (Floyd & Gallagher, 1997; Kaner, 2001).

The parents of disabled children are under stress due to parental or family problems, feeling embarrassed about their children's disability, unable to travel or meet with friends whenever they want. In our research, it was detected that the parents who were high school graduate, employed, with disabled boys between six and 12 were under more stress related to the parental or family problems. According to the research done by Haveman, Gottlieb, and Heler (1997), the mothers with low education level could spend time for them and feel more responsible for caring their children. As the research done by Yildirim-Dogru and Arslan (2008) with the purpose of showing the relationship between the constant anxiety levels of the mothers and the time they spent with children in society (during shopping, meals in a restaurant, and taking their children to the nursery house) suggested that there is a correlation between the education levels of the mothers and the anxiety levels. The employed parents of disabled children were under more stress compared to the unemployed parents since they would be tired nervous after work, as a result, they could not spend enough time with their children (Pelchat et al., 1999). It is thought that being employee, partner and parent at the same time makes the lives of the parents with disabled children more difficult, reduces their own free times as well as affects their psychological health negatively. The researches indicated that the parents with disabled children in early ages are under more parental stress (Beckman, 1983; Wilton & Renault, 1986; Floyd & Gallagher, 1997; Kaner, 2001).

The functional failure consists of some proficiencies about activities of daily living, such as nutrition, communication, plays, management of free time, toilet habits, and expressing emotions. In our research, the parents who were intermediate school graduate, employed, with disabled daughter between six and 12 years old ($p < 0.05$) were under stress mostly due to functional failure of their children. The other researches indicated that the parents with disabled boys (Dyson, 1993) in early ages (Kaner, 2001) were under more stress due to the functional failure. As Haveman, Gottlieb, and Heler (1997) stated that the parents needed help especially for

preparation of the meals, personal care, giving medications, bathing, dressing, dental care, toilets, nutrition and protection from trauma and using wheelchair. The increase in the responsibilities of parents for child care lead them to perceive the child care as difficult and be affected negatively socially (Kearney & Griffin, 2001), physically (Neely-Barnes & Marcenko, 2004) and economically (Farmer et al., 2004), as a result, the family became more stressful (Wilton & Renault, 1986; Hastings et al., 2005). It is estimated that meeting the social and economical needs of the family as total would help for solving some problems of the family (Sloper & Beresford, 2006).

It was indicated in this research that the parents who were illiterate, unemployed, and with disabled boys between six and 12 years old had more family needs. When the average scores the parents got from QRS-F Turkish were examined, it was seen that the parents who were high school graduate, unemployed, and with disabled boys between six and 12 years old were under more stress most of all. Consequently, it is shown that meeting the family needs reduces the stress level of the family, makes easy the situation to adapt and increases the contribution of the family to the education of the children.

In accordance with the results it obtained:

- (1) The needs of the parents with mentally disabled children should be identified and be provided necessary services;
- (2) The stress factors and their reasons related to being parents of mentally disabled children should be described and the parents should learn to be able to deal with the stress by carrying out some activities;
- (3) The families should be supported economically and socially, be assisted for getting support from the institutions and organizations socially, economically and psychologically, be in effort to increase the contributions from the voluntary organizations and be enlightened about the formal or voluntary organizations.

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